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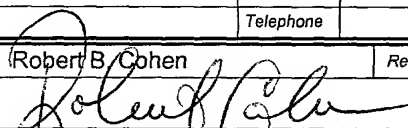
J1064 U.S. PTO

Please type a plus sign (+) inside this box → ☐Approved for use through 10/31/2002 OMB 0651-0032  
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PTO/SB/05 (03-01)

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	SCEIYA 3.0-116
	First Inventor	Ken Kutaragi
	Title	COMPUTER SYSTEM AND USAGE, etc.
	Express Mail Label No.	

EL804517083US

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents</small>		<b>ADDRESS</b> Commissioner for Patents Washington, DC 20231	
1 <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>	7 <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	<div style="writing-mode: vertical-rl; transform: rotate(180deg);">J1046 U.S. PTO 10/066457</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">201/13/10</div>	
2 <input type="checkbox"/> Applicant claims small entity status <small>See 37 CFR 1.27</small>	8 <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>		
3 <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages 41]</span> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	a <input type="checkbox"/> Computer Readable Form (CRF)		
	b. Specification Sequence Listing on: <ul style="list-style-type: none"><li>i <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii <input type="checkbox"/> paper</li></ul>		
	c <input type="checkbox"/> Statements verifying identity of above copies		
<b>ACCOMPANYING APPLICATIONS PARTS</b>			
4 <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets 7]</span>	9 <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
5 <input type="checkbox"/> Oath or Declaration <span style="float: right;">[Total Pages ]</span> <ul style="list-style-type: none"><li>a <input type="checkbox"/> Newly executed (original or copy)</li><li>b <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small></li><li>i <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small></li></ul>	10 <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee) Attorney</small>		
	11 <input type="checkbox"/> English Translation Document (if applicable)		
	12 <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
	13 <input type="checkbox"/> Preliminary Amendment		
6 <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76	14 <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 603) <small>(Should be specifically itemized)</small>		
15 <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>			
16 <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
17 <input checked="" type="checkbox"/> Other <input type="checkbox"/> Unexecuted Declaration			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76 <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. _____ Prior application information: Examiner _____ Group / Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
<b>19. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		<div style="text-align: center;">000530</div>	
Name		or <input type="checkbox"/> Correspondence address below	
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name (Print/Type) Robert B Cohen		Registration No. (Attorney/Agent) 32,768	
Signature 		Date January 31, 2002	

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<b>FEE TRANSMITTAL for FY 2002</b>		<b>Complete if Known</b>	
<i>Patent fees are subject to annual revision.</i>		Application Number	Not Yet Assigned
		Filing Date	
		First Named Inventor	Ken Kutaragi
		Examiner Name	Not Yet Assigned
		Group Art Unit	N/A
		Attorney Docket No.	SCEIYA 3.0-116
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>1,484.00</b>			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																														
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <b>12-1095</b> Deposit Account Name: <b>Lerner, David, Littenberg, Krumholz &amp; Mentlik, LLP</b> The Commissioner is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr> <td colspan="4" style="padding: 5px;">Other fee (specify) _____</td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right; 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Robert B. Cohen	Registration No. (Attorney/Agent)	32,768
Signature		Telephone	(908) 518-6316
		Date	January 31, 2002